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Jun 16 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Moriham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N96000004305 (6)  
1. Corporation Name

WOODBURY PARK HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

257 PLAZA DRIVE UNIT D  
OVIEDO FL 32765

257 PLAZA DRIVE UNIT D  
OVIEDO FL 32765-6457

3. Date Incorporated or Qualified  
08/19/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Woodbury Park Homeowners Assoc

26 Woodbury Park Homeowners Assoc

59-3434025

Not Applicable

22 3101 N. Keller Rd, Suite F

27 1101 N. Keller Rd, Suite F

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Orlando, FL

28 Orlando, FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 32810

25 USA

29 32810

30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, SCOTT D  
369 N NEW YORK AVE 3RD FLOOR  
WINTER PARK FL 32789

81 Name Samuel L. Katanich

82 Street Address (P.O. Box Number is Not Acceptable)  
4005 Maronda Way

84 City Sanford

FL

85 Zip Code 32771

11. Pursuant to the provisions of Section 617.0502 and 617.1113, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.003, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME WHITE, KENNETH L  
STREET ADDRESS 257 PLAZA DRIVE UNIT D  
CITY-ST-ZIP OVIEDO FL 32765

1.1 TITLE PD Pres. D  Change  Addition  
1.2 NAME Howard Scott  
1.3 STREET ADDRESS 377 Maitland Ave, Suite 112  
1.4 CITY-ST-ZIP Altamonte Springs, FL 32701

TITLE VD  
NAME RIGSBY, WILLIAM D  
STREET ADDRESS 257 PLAZA DRIVE UNIT D  
CITY-ST-ZIP OVIEDO FL 32765

2.1 TITLE Vice President and Secretary  Change  Addition  
2.2 NAME Jeff Logsdon  
2.3 STREET ADDRESS 377 Maitland Ave, Suite 112  
2.4 CITY-ST-ZIP Altamonte Spgs, FL 32701

TITLE STD  
NAME TRACY, ELSIE M  
STREET ADDRESS 257 PLAZA DRIVE UNIT D  
CITY-ST-ZIP OVIEDO FL 32765

3.1 TITLE Treasurer  Change  Addition  
3.2 NAME Samuel L. Katanich  
3.3 STREET ADDRESS 4005 Maronda Way  
3.4 CITY-ST-ZIP Sanford, FL 32771

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)

*Handwritten signature and date: 6/16/97*  
*Handwritten note: The dep 61.25*